

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**



IA ETHICS AND  
CAMPAIGN DISCLOSURE BOARD  
PM 5-18-10  
2010 MAY 24 PM 1:05

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Houser for Supervisor Committee

**IMPORTANT:** Indicate by # type of committee you are reporting for: ☐

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM

**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Joan Dyal  
SIGNATURE OF PERSON FILING REPORT

319-362-1222  
TELEPHONE

5-17-10  
DATE SIGNED

I AM FILING A 5-19-10 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☒

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

11.2.10  
County & Local Committees, enter County in  
which Election is held LINN

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 1060.34

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

4915.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 5975.34

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1671.00

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) 12.11 keep acct open

\$ 4304.34

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 52.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Houser for Supervisor Comm.

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
3-20-10	ID# CK# cash	Mr. Robert Ballantyne 1585 Dows St. Box 111 Ely, Iowa 52227		\$ 20.00 Cash	<input type="checkbox"/>
4-9-10	ID# CK# 1262	Millwright Local Union 2158 Political Action Comm. 2707 G2nd St Ct Bentendorf IA 52722-5599		100.00	<input type="checkbox"/>
4-8-10	ID# CK# 6821	Robert C. Connie L. Clark 108 Rock Valley Ln NW CR IA 52405		100.00	<input type="checkbox"/>
4-12-10	ID# CK# 1369	Plumbers + Pipe Fitters 125 Political Education Fund 1839 16th Ave SW CR IA 52404-1755		500.00	<input type="checkbox"/>
4-12-10	ID# CK# 1474	Richard Petersmith 1211 Wiley Blvd SW CR IA 52404-1320		50.00	<input type="checkbox"/>
4-15-10	ID# CK# 2058	Eugene Jahncke 196 -22nd Ave SW CR IA 52404		25.00	<input type="checkbox"/>
4-16-10	ID# CK# 4057	Albert D. Van Gampleare Mitzi J. Van Gampleare 2414 Bowling St SW CR IA 52404		50.00	<input type="checkbox"/>
4-16-10	ID# CK# 6885	mark S. Seber 3610 Johnson Ave NW #7 CR IA 52405		10.00	<input type="checkbox"/>
4-17-10	ID# CK# 9551	Richard + Norma Wenzel 4007 Hickory Hill Ln SE CR IA 52403		50.00	<input type="checkbox"/>
4-17-10	ID# CK# 2001	Dean A Abramson Lisa S. Abramson 4867 Oak Grove Ct NE CR IA 52411		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 955.00

TOTAL (if last page of this schedule)

\$

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Page 1 of 5  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Houser for Supervisor Comm

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4-17-10	ID# CK# 3935	David S Good Kathleen Good 2102 Linmar Dr NE CR IA 52402		\$ 25.00	<input type="checkbox"/>
4-17-10	ID# CK# 1730	David D Omar 5425 Kacena Ave Unit B Marion IA 52302		100.00	<input type="checkbox"/>
4-17-10	ID# CK# 6720	Celeste A Gallagher Brian Shawn Gallagher 6504 Danbern Ln NE CR IA 52402		50.00	<input type="checkbox"/>
4-17-10	ID# CK# 7389	Robert R Rush 900 2nd St SE Unit 605 CR IA 52401		150.00	<input type="checkbox"/>
4-17-10	ID# CK# 3554	James W or Susan K Turner 18 Squaw Ridge Rd Marion IA 52302		50.00	<input type="checkbox"/>
4-17-10	ID# CK# 3287	Dale R Thompson Joy R Thompson 6808 Stone Meadow Dr SW CR IA 52404-1096		25.00	<input type="checkbox"/>
4-17-10	ID# CK# 4320	Sandra K Varn 3905 37th Ave SW Unit B CR IA 52404-8315		25.00	<input type="checkbox"/>
4-18-10	ID# CK# 6439	Scott Olson 6467 Quail Ridge Dr SW CR IA 52404		50.00	<input type="checkbox"/>
4-19-10	ID# CK# 8355	Judy A Stalk Fleet 1659 - 24th St NW CR IA 52405		25.00	<input type="checkbox"/>
4-19-10	ID# CK# 10364	Waldo or Charlotte Morris Nancy L Mowry 4512 Lakeside Rd Marion IA 52302-9555		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 700.00	
TOTAL (if last page of this schedule)				\$	

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Page 2 of 5  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Houser for Supervisor Comm.

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4-19-10	ID# CK# 9889	John C Bloomhall Cynthia A. Bloomhall 272 Haggis Way Marion IA 52302		\$ 200.00	<input type="checkbox"/>
4-19-10	ID# CK# 21525	Thomas L. Ailer Kathleen M Ailer 1089 Cedar Woods Rd CR IA 52403-9046		100.00	<input type="checkbox"/>
4-19-10	ID# CK# 1565	Juanita Baer 6429 Quail Ridge Dr SW CR IA 52404		25.00	<input type="checkbox"/>
4-20-10	ID# CK# 6465	Timothy L Charles Janice Cohea Charles 529 Augusta Dr SE CR IA 52403		100.00	<input type="checkbox"/>
4-20-10	ID# CK# 8072	Richard F Fiester Janice Fiester 5531 Hickorywood Ct CR IA 52411-8043		25.00	<input type="checkbox"/>
4-21-10	ID# CK# 9055	S.E. Lamb + Lynn Lamb Barbara Hamilton 2521 30th St SW CR IA 52404-3222		10.00	<input type="checkbox"/>
4-22-10	ID# CK# 1144	Joseph E Ironside 222 Prospect PL SW CR IA 52404		50.00	<input type="checkbox"/>
4-23-10	ID# CK# 2517	Leta m wall 156 Cherry Hill Rd NW CR IA 52405-3025		20.00	<input type="checkbox"/>
4-23-10	ID# CK# 1316	Lillian Houser Judy Cooper 7-25th Ave SW CR IA 52404	mother sister	100.00	<input type="checkbox"/>
4-23-10	ID# CK# 9131	Bob Dennis 3693 Lewis Botlenis Rd Shellsburg IA 52332		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 655.00	
TOTAL (if last page of this schedule)				\$	

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Page 3 of 5  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Houser for Supervisor Comm

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4-24-10	ID# CK# 1305	Richard Harger Dorothy Harger Kelly Zbank 1890 Dows St PO Box 108 Ely IA 52227-0108		\$ 50.00	<input type="checkbox"/>
4-26-10	ID# CK# 8061	Roger A Boyles Marcia L. Boyles 4131 Cedar Hghts Trail Center Pt IA 52213		20.00	<input type="checkbox"/>
4-26-10	ID# CK# 10531	Harold Lee Denton PO Box 74002 CR IA 52407-4002		100.00	<input type="checkbox"/>
4-26-10	ID# CK# 2776	Ken A Davidson 384 West Prairie Dr Fairfax IA 52228		200.00	<input type="checkbox"/>
4-27-10	ID# CK# 5275	Donald P Hattery Mary O Hattery 100 Rosedale Rd SE CR IA 52403		25.00	<input type="checkbox"/>
4-28-10	ID# CK# 6205	Linda R Langston 4257 Sunland Ct SE CR IA 52403		50.00	<input type="checkbox"/>
4-28-10	ID# CK# 3600	Gerald L. Hill Jennifer Hill 821 - 21st Ave SW Cedar Rapids IA 52404		25.00	<input type="checkbox"/>
4-29-10	ID# CK# 4868	F. James Bradley Lawyer 2007 - 1st Ave SE CR IA 52402-6344		50.00	<input type="checkbox"/>
5-1-10	ID# CK# 6658	Leland C Millard or Shirley D. Millard 101 - 3rd Ave S PO Box 84 Alburnett IA 52202		10.00	<input type="checkbox"/>
5-1-10	ID# CK# 10659	Lee or Andrea Liu 3086 Loggerhead Rd CR IA 52411-9512		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 580.00	
TOTAL (if last page of this schedule)				\$	

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Page 4 of 5  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Houser for Supervisor Comm

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5-2-10	ID# CK# 9141	Dr Brian C Randall Dr Mary C. Kemm 1916 Oak Knolls Ct SE CR IA 52403		\$ 100.00	<input type="checkbox"/>
5-4-10	ID# CK# 6703	Robert J Brimmer Jacqueline L. Brimmer 5219 Broadlawn Dr SE CR IA 52403-3212		100.00	<input type="checkbox"/>
5-4-10	ID# CK# 1878	Sharon L. Bertroche Joseph Bertroche Jr 3221 Falcon Dr NE CR IA 52402		100.00	<input type="checkbox"/>
5-4-10	ID# CK# 1444	Laborers Political League Local 43 5000 J St SW CR IA 52404		250.00	<input type="checkbox"/>
5-5-10	ID# CK# 1050	William D. Bowers Myrt J Bowers 203 Lincoln Hwy Mt Vernon IA 52314		25.00	<input type="checkbox"/>
5-6-10	ID# CK# 3183	Ironworkers Local 89 Political Ed Fund 5000 J St SW CR IA 52404		500.00	<input type="checkbox"/>
5-13-10	ID# CK# 20559	IBEW Educational Comm. 900 7th St NW Washington DC 20001		750.00	<input type="checkbox"/>
5-13-10	ID# CK# 3550	Heat & Frost Insulators & Asbestos Workers L81 CR IA 52404		100.00	<input type="checkbox"/>
5-13-10	ID# CK# 3118	James A Novak 2040 - 44th St SE CR IA 52403		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 2025.00

TOTAL (if last page of this schedule)

\$ 4915.00

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Page 5 of 5  
(for Schedule A)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Houser for Supervisor Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3-22-10	ID# CK# 1260	Ad Craft Printing 309 5th Ave SE PO Box 246 CR IA 52406	envelopes remittance envelopes letter head	\$ 292.11
4-15-10	ID# CK# 1261	Mailing Services 950 Capital Dr SW CR IA 52404-9096	postage	340.85
5-10-10	ID# CK# 1262	James Houser 505 Rockvalley CR IA 52404	reimb for Adcraft, color letter head envelopes, cowboy cards	906.59
5-12-10	ID# CK# 1263	Mailing Services 950 Capital Dr SW CR IA 52404	data processing mailing services fulfillment	131.45
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1671.00
TOTAL (if last page of this schedule)				\$ 1671.00

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

COMMITTEE NAME (Must be same as on Statement of Organization)

Houser for Supervisor Committee

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
3-17-10	Dave Kaplan 2025 Sandlewood Dr NE CR IA		vinyl letters	\$ 52.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

52.00

TOTAL (if last

page of this

schedule)

\$

52.00

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 Page 1 of 1  
(for Schedule E)